

MATTHEW DENN
INSURANCE COMMISSIONER



841 SILVER LAKE BLVD.

DOVER, DELAWARE 19904-2465
(302) 739-4251

FACSIMILE (302) 739-5280

Department of Insurance

APPLICANT MUST PERSONALLY COMPLETE AND SIGN THIS APPLICATION (PLEASE PRINT OR TYPE)

REQUEST FOR BUSINESS ENTITY INSURANCE LICENSE (\$75 Fee)

Application must be completed and signed by the proprietor, a partner or an officer of the firm

NAME					
F.E.I.N.					
Busines	ss Address Inf	ormation			
ADDRESS	ESSSUITE OR BOX NO				
CITY	STATE	ZI	Р	PHONE	
BUSINESS E-MAIL ADDRESS		_ BUSINES	S WEBSITE A	DDRESS	
Mailing	g Address Info	ormation			
ADDRESS		SUITE OF	R BOX NO		
CITY	STATE	ZI	Р	PHONE	
ne:ne:					
RT 3 TYPE OF LICENSE REQUESTED					
(01) Producer			(08) (12)	Limited Lines Producer Misc. Limited Lines Producer	
RT 4 STRUCTURE OF COMPANY					
Corporation Partnership Sole Proprietorship	Limi	ed Liabili	ty Compa	ny Limited Liability Partno	
A. What type organization?					
B. Date of organization.					
C. State of Domicile					

РА	PRINCIPAL OFFICERS (Name)	(SSN)	(Position)			
PA	ART 6 BACKGROUND INFORMATION			1		
P	lease read the following very carefully and answer every question. All co	opies of documents must be certif	ied. All written statements			
	las the business entity or any owner, partner, officer or director ever beer flicer or director currently charged with, committing a crime, whether or			Yes No		
	"Crime" includes a misdemeanor, felony or a military offense. You m "Convicted" includes, but is not limited to, having been found guilty by contendre, or having been given probation, a suspended sentence or a fi	verdict of a judge or jury, havin				
a) b) c)	If you answer yes, you must attach to this application: a written statement explaining the circumstances of each incident, a certified copy of the charging document, and a certified copy of the official document which demonstrates the resolu	ution of the charges or any final j	udgment			
	2. Has the business entity or any owner, partner, officer or director ever been involved in an administrative proceeding regarding any professional or occupational license? Yes No					
	"Involved" means having a license censured, suspended, revoked, probation or surrendering a license to resolve an administrative ac administrative or arbitration proceeding which is related to a profe license application denied or the act of withdrawing an application noncompliance with continuing education requirements or failure	ction. "Involved" also means bei essional or occupational license. In to avoid a denial. You may ex-	ing named as a party to an "Involved" also means having a			
	If you answer yes, you must attach to this application:					
a)	a written statement identifying the type of license and explaining the cir	rcumstances of each incident,				
b)	a certified copy of the Notice of Hearing or other document that states to	the charges and allegations, and				
c)	a certified copy of the official document which demonstrates the resolution	ation of the charges or any final ju	adgment.			
3.	Has any demand been made or judgment rendered against the business of monies by an insurer, insured or producer, or have you ever been subject		cer or director for overdue	Yes No		
	If you answer yes, submit a statement summarizing the details of the inc	debtedness and arrangements for	repayment.			
4.	Has the business entity or any owner, partner, officer or director ever be delinquent tax obligation that is not the subject of a repayment agreement		o which you are applying of any	Yes No		
	If you answer yes, identify the jurisdiction(s):					
	5. Is the business entity or any owner, partner, officer or director a party to, or ever been found liable in any lawsuit or arbitration proceeding Yes No involving allegations of fraud, misappropriation or conversion of funds, misrepresentation or breach of fiduciary duty?					
	If you answer yes, you must attach to this application:					
a)	a written statement summarizing the details of each incident,					
b)	a certified copy of the Petition, Complaint or other document that commenced the lawsuit or arbitration, and					
c)	a certified copy of the official document which demonstrates the resolution of the charges or any final judgment.					

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6. Has the business entity or any owner, partner, officer or director ever had an insurvith an insurance company terminated for any alleged misconduct? If you answer yes, you must attach to this application: a) a written statement summarizing the details of each incident and explaining we receiving an insurance license, and b) certified copies of all relevant documents.							
Applicants Certification and Attestation							
The undersigned owner, partner, officer or director of the business entity hereby	certifies, under penalty of perjury, that:						
 material information in connection with this application is grounds for license criminal penalties. Where required by law, the business entity hereby designates the Commission jurisdiction for which this application is made to be its agent for service of preservice upon the Commissioner or Director of that jurisdiction is of the same of the business entity grants permission to the Commissioner or Director of Inst information supplied with any federal, state or local government agency, currents. Every owner, partner, officer or director of the business entity either a) does not currently in compliance with that obligation. I authorize the jurisdictions to give any information they may have concerning the jurisdictions and any person acting on their behalf from any and all liabilities. I acknowledge that I understand and comply with the insurance laws and regressions. If required, I have received a Certificate of Good Standing from the jurisdiction. 	urance in each jurisdiction for which this application is made to verify any ent or former employer or insurance company. not have a current child-support obligation, or b) has a child-support obligation and is g me to any federal, state or municipal agency, or any other organization and I release ty of whatever nature by reason of furnishing such information. ulations of the jurisdictions to which I am applying for licensure/registration.						
Attachments							
The following attachments must accompany the application otherwise the application may be returned unprocessed or considered deficient.							
 For Non-Resident License Applications and unless otherwise noted in the State Matrix of Business Rules, a state will rely on an electronic verification of an applicant's resident license through the NAIC's Producer Database in lieu of requiring an original Letter of Certification from the resident state. Any jurisdiction specific attachments listed in the State Matrix of Business Rules (www.licenseregistry.com). 							
	Must be signed by an officer, director, principal or partner of the business entity:						
	Month Day Year						
	Signature						
	Typed or Printed Name						
	Title						

Social Security Number

State

Zip

Address

City